USA-010

H. Brock Kolls

PTO/SB/01 (03-01)
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DECLARATION FOR UTILITY OR

Attorney Docket Number

DESIGN	- · · · · · · · · · · · · · · · · · · ·	First Named Inve	ntor	II. BIOCK ROIIS
PATENT APPLIC		COM	PLETE IF K	NOWN
(37 CFR 1.6		Application Numb	er	
	•	Filing Date		June 19, 2001
Submitted OR	Declaration Submitted after Initial	Group Art Unit		
Filing	Filing (surcharge (37 CFR 1.16 (e))	Examiner Name		
	required)	Examiner Hame		
As a below named inventor, I here	by declare that:			1
My residence, mailing address, and				
I believe I am the original, first and s names are listed below) of the subje	cole inventor (if only one o ect matter which is claime	name is listed below) or ed and for which a paten	an original, fire	st and joint inventor (if plural the invention entitled:
SYSTEM FOR PROVII INTERACTIVE TRANS	DING REMOTE AU SACTION CAPAB	UDIT, CASHLESS ILITIES IN A VEI	PAYMEN NDING MA	IT, AND ACHINE
	(Title of the	e Invention)		
the specification of which	(Title Of the	; mvenuory		
[1]				
is attached hereto				
OR [as United Sta	toe Application	n Number or PCT International
was filed on (MM/DD/YYYY)		as United Sta	tes Application	THORIDE OF FOT MICHIGAN
Application Number	and was an	nended on (MM/DD/YYY	η <u></u>	(if applicable).
<u> </u>				
I hereby state that I have reviewed amended by any amendment spec	ifically referred to above.			
in-part applications, material inform PCT international filing date of the	continuation-in-part appli	ication.	cate of the pr	
I hereby claim foreign priority bene or plant breeder's rights certificate	efits under 35 U.S.C. 119 e(s), or 365(a) of any PC a. listed below and have 's rights certificate(s), or	9(a)-(d) or (f), or 365(b) or international applicational applications.	hv checking t	application(s) for patent, inventor's signated at least one country other the box, any foreign application for ving a filing date before that of the
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
Hamber(3)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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Additional foreign application	numbers are listed on a	supplemental priority da	ta sheet PTO/	SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code				O#	? X Co	rrespondence address below
USA Technologies, Inc. Dept. IP Name H. Brock Kolls						
200 Plant Ave.						
city Wayne				State PA	A	ZIP 19087
Country USA	Telep	hone	610-	989-0340		Fax 610-989-0344
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR :		A petition	on has	s been filed	for this un	signed inventor
Given Name (first and middle [if any]) H. Brock				Family Name or Surname	Kolls	
Inventor's Signature	1					Date June 19, 2001
Residence: City Pottstown		State P	PA	Country	, USA	Citizenship USA
Mailing Address 1573 Potter Drive						
city Pottstown		State P	'A	ZIP 1	9087	Country USA
NAME OF SECOND INVENTOR:		A petition	has l	been filed fo	or this unsi	gned inventor
Given Name (first and middle [if any])				amily Name or Surname		
Inventor's Signature Date						
Residence: City		State		Country		Citizenship
Mailing Address						
City		State		ZIP		Country
Additional inventors are being named on the	_sup	plemental A	ddition	al Inventor(s) s	sheet(s) PTO	/SB/02A attached hereto.

Please type a plus sign (+) inside this box	+	 ▶	s box	this	inside	(+)	sign	plus	oe a	type	Please
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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	June 19, 2001
First Named Inventor	H. Brock Kolls
	SYSTEM FOR PROVIDING REMOTE AUDIT CASHLESS PAYMENT, AND INTERACTIVE
Group Art Unit	TRANSACTION CAPABILITIES IN A
Examiner Name	VENDING MACHINE
Attorney Docket Number	USA_010

Practitioners at Customer Number OR Practitioner(s) named below: Name Name Registration Number 42,757
Name Registration Number
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l am the:
Applicant/Inventor.
Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record
Name George R. Jensen Jr.
Signature Signature
Date June 19,2001
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multip forms if more than one signature is required, see below.
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